

| | | | |
|---|---------------------|--|-------------------|
| UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i> | Attorney Docket No. | | 02716.0005.NPUS01 |
| | First Inventor | | Rasmus B. Jensen |
| | Title | PROTEORHODOPSIN MUTANTS WITH IMPROVED OPTICAL CHARACTERISTICS | |
| | Express Mail | EL615430555US | |

| | |
|--|---|
| APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application contents. | ADDRESS TO: Commissioner for Patents Box Patent Application P.O. Box 1450, Alexandria, VA 22213-1450 |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/SB/17) (Submit an original, and a duplicate for fee processing) 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages 51] (preferred arrangement set forth below) -Descriptive title of the invention -Cross reference to Related Applications -Statement Regarding Fed Sponsored R & D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Summary of the Invention -Detailed Description -Claim(s) -Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 106] 5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 3] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for continuational divisional with Box 17 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. <input checked="" type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input checked="" type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input checked="" type="checkbox"/> paper c. <input checked="" type="checkbox"/> Statements verifying identity of above copies |
| ACCOMPANYING APPLICATION PARTS 9. <input type="checkbox"/> Assignment papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Other: | |

 031088 U.S. PTO
 10/724264


112603


17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: /

Prior application information: Examiner Group I Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

| | | | | | |
|--|----------------------------------|-----------|--------------|----------|--------------|
| 18. CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number or Bar Code Label  or <input type="checkbox"/> Correspondence address below | | | | | |
| Name | Howrey Simon Arnold & White, LLP | | | | |
| Address | 301 Ravenswood Avenue | | | | |
| | Box 34 | | | | |
| City | Menlo Park | State | CA | Zip Code | 94025 |
| Country | USA | Telephone | 650-463-8181 | Fax | 650-463-8400 |

| | | | |
|-------------------|---|------|---------------|
| NAME (Print/Type) | Viola T. Kung, Reg. No. 41,131 | | |
| Signature |  | Date | Nov. 26, 2003 |



14202 U.S. PTO

PTO/SB/17 (09-00)

Approved for use through 10/31/2000. OMB 0651-003
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL For FY 2004

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$1372.00)

Complete if Known

| | |
|----------------------|-------------------|
| Application Number | Not Yet Assigned |
| Filing Date | November 26, 2003 |
| First Named Inventor | Rasmus B. Jensen |
| Examiner Name | Not Yet Assigned |
| Group Art Unit | Not Yet Assigned |
| Attorney Docket No. | 02716.0005.NPUS01 |

| METHOD OF PAYMENT | | FEE CALCULATION (continued) | | | |
|--|-----------------|-----------------------------|-----------------|--|-------------------|
| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: | | 3. ADDITIONAL FEES | | | |
| Deposit Acct. No. 08-3038 | | | | | |
| Deposit Account Name Howrey Simon Arnold & White, LLP | | | | | |
| <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 | | | | | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | | | | |
| 2. <input type="checkbox"/> Payment Enclosed: | | | | | |
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other | | | | | |
| FEE CALCULATION | | | | | |
| 1. BASIC FILING FEE | | | | | |
| Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid |
| 101 | 770 | 201 | 385 | Utility filing fee | 770.00 |
| 106 | 340 | 206 | 170 | Design filing fee | |
| 107 | 530 | 207 | 265 | Plant filing fee | |
| 108 | 770 | 208 | 385 | Reissue filing fee | |
| 114 | 160 | 214 | 80 | Provisional filing fee | |
| SUBTOTAL (1) | | | | | (\$) |
| 2. EXTRA CLAIM FEES | | | | | |
| Total Claims 23 -20** = 3 X 18.00 = 54 | | | | | |
| Independent Claims 6 - 3** = 3 X 86.00 = 258 | | | | | |
| Multiple Dependent 290.00 = 290 | | | | | |
| Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description | |
| 103 | 18 | 203 | 9 | Claims in excess of 20 | |
| 102 | 86 | 202 | 43 | Independent claims in excess of 3 | |
| 104 | 290 | 204 | 145 | Multiple dependent claim, if not paid | |
| 109 | 86 | 209 | 43 | ** Reissue independent claims over original patent | |
| 110 | 18 | 210 | 9 | ** Reissue claims in excess of 20 and over original patent | |
| SUBTOTAL (2) | | | | | (\$602.00) |
| **or number previously paid, if greater; For Reissues, see above | | | | | |
| 3. ADDITIONAL FEES (continued) | | | | | |
| Large Fee | Entity Fee | Small Fee | Entity Fee | Fee Description | Fee Paid |
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for ex parte reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 116 | 420 | 216 | 210 | Extension for reply within second month | |
| 117 | 950 | 217 | 475 | Extension for reply within third month | |
| 118 | 1,480 | 218 | 740 | Extension for reply within fourth month | |
| 128 | 2,010 | 228 | 1,005 | Extension for reply within fifth month | |
| 119 | 330 | 219 | 165 | Notice of Appeal | |
| 120 | 330 | 220 | 165 | Filing a brief in support of an appeal | |
| 121 | 290 | 221 | 145 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,330 | 241 | 665 | Petition to revive - unintentional | |
| 142 | 1,330 | 242 | 665 | Utility issue fee (or reissue) | |
| 143 | 480 | 243 | 240 | Design issue fee | |
| 144 | 640 | 244 | 320 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | Petitions related to provisional applications | |
| 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 146 | 770 | 246 | 385 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 770 | 249 | 385 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 770 | 279 | 385 | Request for Continued Examination (RCE) | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |
| Other fee (specify) _____ | | | | | |
| * Reduced by Basic Filing Fee Paid | | | | | |
| SUBTOTAL (3) (\$) | | | | | |

| SUBMITTED BY | | Complete (if applicable) | |
|-------------------|---------------|-----------------------------------|---------------|
| Name (Print/Type) | Viola T. Kung | Registration No. (Attorney/Agent) | 41,131 |
| Signature | | Telephone | 650-463-8181 |
| | | Date | Nov. 26, 2003 |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.